

PTO/SB/82 (09-04)
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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

10/697,982

31 October 2003

Christoph Zechner

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Filing Date

Application Number

First Named Inventor

REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND

NEW POWER OF ATTORNEY
AND
CHANGE OF CORRESPONDENCE ADDRESS

Art Unit

Examiner Name
Lauchman

Attomey Docket Number | SYNP 439-1

| I hereby revoke all previous powers of attorney given in the above-identified application. | | | | | | | | |
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| A Power of Attorney is submitted herewith. | | | | | | | | |
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| Applicant/Inventor. | | | | | | | | |
| Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) | | | | | | | | |
| SIGNATURE of Applicant or Assignee of Record | | | | | | | | |
| Signature Chi dy Dul | | | | | | | | |
| Name | Christoph Zechner | | | | | | | |
| Date | | 02.2005 | | elephone | +41 | | 389 97 | |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*. | | | | | | | | |
| *Total offorms are submitted. | | | | | | | | |

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